ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
			01/24/00
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		45	2/10
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		#01033	2-16-00

INDEX OF CLAIMS

✔ .... Rejected
= .... Allowed
− (Through numeral)... Canceled
÷ .... Restricted

N .... Non-elected
I .... Interference
A .... Appeal
O .... Objected

Claim	Date
1	
2	
...	
50	

Claim	Date
51	
...	
100	

Claim	Date
101	
...	
150	

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

BEST AVAILABLE COPY